## PART B - FEE(S) TRANSMITTAL

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(703) 746-4000 or Fax

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  23716 7590 09/13/2004				napers. Each addition	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
ANTHONY ASQUITH 28-461 COLUMBIA STREET WEST WATERLOO, ON N2T 2P5 CANADA				I hereby certify that to States Postal Service addressed to the Ma			
12/10/2004 SFELEKE2 00000151 012555 09241744					(Signature)		
01 FC:2501 700.00 DA 02 FC:8001 30.00 DA					(Date)		
APPLICATION NO.	FILING DATE	FIRST NAMED IN		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/241,744	02/01/1999	I	MURRAY D.	EINARSON	46-01US	9118	
TITLE OF INVENTION: N	MULTI-LEVEL MONITORI	***			T		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	nonprovisional YES		<u> </u>	\$0	_ \$ \frac{3665}{685}	12/13/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
LARKIN, DANIEL SEAN		2856		073-152230	_		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
DI FASE NOTE: Unles	D RESIDENCE DATA TO B s an assignee is identified be n 37 CFR 3.11. Completion	low no assignee	data will app	ear on the patent. If an assis	nee is identified below, the c	locument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Murray D. EINARSON Mountain View, California							
	e assignee category or catego	ries (will not be pr	inted on the p	atent): 🌠 Individual 🗖	Corporation or other private gr	oup entity Government	
4a. The following fee(s) are	e enclosed:	<b>4</b> b	D. Payment of	• •			
<u> </u>				, ,	amount of the fee(s) is enclosed. redit card. Form PTO-2038 is attached.		
					is hereby authorized by charge the required fee(s), or credit any overpayment, to Number 01-255 (enclose an extra copy of this form).		
		<del>-</del>	Deposit Acc	ount Number 01-255	(enclose an extra c	copy of this form).	
	s (from status indicated above SMALL ENTITY status. See		☐ b. Applic	ant is no longer claiming SM	ALL ENTITY status. See 37 C	CFR 1.27(g)(2).	
				<del>-</del>	sly paid issue fee to the applic gistered attorney or agent; or t		
Authorized Signature 3.				Date	November 30,	2004	
Typed or printed name_	Anthony Asqui	th	Registratio	on No. 32373			
This collection of informati	ion is required by 37 CFR 1.3	11. The informatio	on is required	to obtain or retain a benefit by	the public which is to file (an	d by the USPTO to process)	

an application. Confidentiality is governed by 3/ CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## ANTHONY ASQUITH

Commissioner of Patents, PO Box 1450 Alexandria, VA 22313-1450

24 November 2004

**Patent Attorney** 

PAYMENT OF ISSUE FEE Serial Number: 09/241,744

Confirmation Number: 9118

Anthony Asquith Registered Patent Agent (Canada and USA) Chartered Patent Attorney(UK) European Patent Attorney Filing Date: 01 February 1999

Art Unit: 2856

Dear Sir,

Examiner: LARKIN, Daniel Sean Inventor: EINARSON, Murray D. et al. Assignee: EINARSON, Murray D.

Title: MULTI-LEVEL MONITORING WELL

Date Due: 13 December 2004

Our File Ref: 406-01US

We wish to pay the Issue Fee of \$685.00 on the above patent application.

We wish also to purchase 10 copies of the printed patent, at a cost of \$30.00.

Corrected formal drawings are enclosed.

Please charge the full amount of the fees to our deposit account, number 01-2555.

Submitted by,

Anthony Asquith (Regn # 32373) (Customer # 23716) Agent for the Applicant

Telephone:

Office and Postal Address:

Suite 28.

519 746 6732

Anthony Asquith & Co

461 Columbia St West Waterloo, Ontario

Canada N2T 2P5

Encl:

PTOL-85 (in duplicate)
 Drawings (7 sheets) + letr

Facsimile:

519 888 6093

E-Mail:

aa@asquithco.com

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